

PROCEEDINGS OF THE BROWN COUNTY HUMAN SERVICES BOARD

Pursuant to Section 19.84 Wis. Stats, a regular meeting of the **Brown County Human Services Board** was held on Thursday, February 8, 2018 at Health & Human Services; Sophie Beaumont Building; 111 N. Jefferson St.; Green Bay, WI 54301

Present: Chairman Tom Lund
Carole Andrews, Jesse Brunette, Bill Clancy, Susan Hyland, Paula Laundrie,
Aaron Linssen

Excused: JoAnn Grashberger, Craig Huxford

Also

Present: Erik Pritzl, Executive Director
Eric Johnson, Finance Manager
Luke Schubert, Hospital & Nursing Home Administrator

1. **Call Meeting to Order:**
The meeting was called to order by Chairman Tom Lund at 5:15 pm.
2. **Approve / Modify Agenda:**
LAUNDRIE/ANDREWS moved to approve the February 8, 2018 Agenda.
The motion was passed unanimously.
3. **Approve Minutes of December 14, 2017 Human Services Board Meeting:**
CLANCY/HYLAND moved to approve the Minutes dated December 14, 2017.
The motion was passed unanimously.
4. **Executive Director's Report:**
Executive Director Erik Pritzl distributed his February report.

January's report was included within the agenda packet, and seeing there were no questions, Pritzl highlighted items from the February report.

General Update:

- Recruitment is ongoing for the Community Services Administrator position (formerly Deputy Director). A few interviews have been scheduled from the current pool of candidates and Pritzl is optimistic about the pool.
- POINT (Poverty Outcomes Improvement Network Team) is a regional initiative led by United Way. Four areas have been identified for improvement: education; economic stability; health and wellness; and family support and social connectedness. Agencies within the region are looking for Green Bay/Brown County projects with the support of continuous improvement facilitators.

Community Services:

Emergency Preparedness

Emergency Support Function (ESF) 6 – we have been reviewing our responsibilities for mass care, human services, housing and emergency assistance if activation is needed. Working alongside Preparedness Community Educator from Public Health, and other supporting agencies, we had a roundtable discussion about the plan and our various roles.

We received ideas for improvement and clarification of roles, and are discussing a tabletop exercise in the coming months.

Children, Youth and Families

January has been busy for Child Protective Services, with 45 same-day referrals; the highest number we have seen in three years.

CLANCY: Can you give us a reason?

PRITZL: There have been some pretty significant cases. Our supervisors saw the numbers, and said we need to make sure we correctly identify same-day referrals. We want to make sure we have this (the numbers) right and we didn't just send people out when it could have been a next-day or within five-days versus a same-day referral. Same-days (referrals) are very stressful for staff, and if there are 45, that is over two per day that we were handing out. That is unusual. We will see if it carries over into February, but we also want to look back to see if we correctly identified the cases.

ANDREWS: Do we use any software to help with this? Somewhere in my reading over the last couple of months, there was an article on communities using software developed specifically to help them weed out the cases that need to be seen now.

PRITZL: Yes, there are actuarial models. Right now, the State guides all policy decisions; they give us the screening guides, they tell us how to make those decisions. I know the Department of Children and Families is aware of those risk models and they have talked about using them, but they haven't developed them yet. Pennsylvania has had good success with that. Wisconsin does need to look at that, but it needs to come at the State level.

Behavioral Health

Our January 2018 Emergency Detention numbers look about the same as January 2017.

There has been some interest at the Criminal Justice Coordinating Board to form a court services division or department to bring together different program units to serve the Treatment Court and Diversion programs. We are looking at whether this stays with Health & Human Services, or if it becomes its own department. We are working with the Human Services Committee on this, providing information, and looking for guidance back.

Community Treatment Center

The census is stable, a little higher than the previous month, but nothing to be concerned about.

We are working with Administration to assess operations at the CTC. We will be working with a consulting firm to look at short- and long-term options as far as expenses and services offered to make sure we have a good mix of services and revenue models to support operations. This will be going forward in the next month or two. We will select a group to help, and then we will start framing the study.

Not Included within February Report

We do have more of a schedule regarding the move of Public Health to Sophie Beaumont as well as the Duck Creek/Highway Building in Howard. It appears, in March, we will be moving some staff out of Sophie Beaumont to Northern Building. The group moving to the Highway Building would be Environmental Health. They were viewed as the group that could be a stand-alone operation with the Sanitarians and the Lab could be constructed there.

Other units of Public Health are moving to Mezzanine Level of Sophie Beaumont, and shifting current staff down to the first floor. It should be completed in 2018; September

timeframe is when Public Health would move in with final completion by end of November with all units in place.

Discussion centered on how Sophie Beaumont is not a large enough building to hold the whole Health and Human Services Department, and the eventual need for the department to be located in a larger space, where the whole department could be housed under one roof.

LAUNDRIE/ANDREWS moved to receive the Executive Director's Report and place on file. Motion was carried unanimously.

5. CTC Administrator Report including NPC Monthly Report:

January's report was included within the agenda packet, and since there were no questions, Administrator Luke Schubert referred to his February report and highlighted the following:

There are a couple contracts up for review, with one awaiting feedback from the medical director seeking knowledge of other services out there in mobile x-ray services.

There was one unsubstantiated patient care grievance filed in January.

Performance Improvement Projects

Treatment Planning: There were some historical concerns that came up through the CMS & DHS reviews. The focus is on individualized, measurable specific goals for each client, and we are doing really well on this. We are continuing to monitor this and keep the project going in 2018 to focus more on the technical elements of a review every seven days; each one is signed by a client, etc. We are also doing a software upgrade to this portion of the Avatar system.

Readmissions and Discharge Planning: We came close to our goal. It is effective that we have a Discharge Planning Committee meeting involving all stakeholders (e.g., Crisis Center, case manager, etc.).

Clients with No Insurance: We made some minor changes between billing and Economic Support to be sure we are capturing all the clients we can that we can bill and get them benefits. There will always be a small percentage of patients who will still refuse to fill out the paperwork for benefits.

CLANCY: People will not complete the paperwork to receive benefits?

SCHUBERT: The alternative may be a strategy (by the clients) of "I am not going to apply for benefits because I am not going to pay the bill." As a department we have some actions we can do like tax garnishments or collections when people refuse to pay the invoices they are receiving, but we cannot force them to apply for medical assistance benefits. We approach them at least three times, while they are under our care.

PRITZL: Some people don't want to provide the government with their information. Some will say they are over-assets, I make too much money, and won't fill out the paperwork.

SCHUBERT: Of the clients we identified and approached to complete applications, 8% refused to complete an application, which is down from last year (our goal was 10%); so more people are completing them. Of the ones completed, 75% were eligible for medical assistance and received benefits.

JOHNSON: For the Nursing Home, which are longer-term stays, they understand that even if they are over-assets now, in a month or so they will be under, and we have much more success.

LUND: There is also more family involvement and more time to decide and understand the process.

SCHUBERT: Most (that won't fill out the paperwork) are emergency placements.

HYLAND: 92% (completion of benefits paperwork) is a pretty good percentage.

SCHUBERT: Our Economic Support division does a great job at tracking those down.

Revised Recommendations for 2018 PIPs from the QAPI Committee:

- *CTC New Staff Orientation*: to increase retention and reduce turnover, get better/more data from Human Resources
- *Treatment Planning*: (discussed earlier in meeting, please see above)
- *Insurance Authorizations & Appeals*: starting new process to be sure we are adequately capturing authorizations; we have noticed some technical denials for not submitting the request for authorization prior to admission. Trying to work with Crisis Center to submit the authorization before the client reaches the CTC.
- *Legionellosis Water Treatment Monitoring*: a new DHS/CMS requirement to monitor for it; Brown County Facilities department says we should be OK since our building is newer.
- *EM-1 Medical Clearance Throughput*: monitoring the data that is controllable on our side; much data has been presented on when time starts for an officer starts on a call, and total officer time spent on a call. We are looking at from when the CTC was notified to when the client is admitted. Revised intake and admission form to include this time.

LAUNDRIE: So (for example) the two hours the police were involved prior to Crisis or waiting at Crisis that is not going to enter into the equation?

SCHUBERT: I want to focus on our controllable time because there is a lot of information that could skew that data.

LUND: Crisis reports out what their data is?

PRITZL: We receive numbers. I am unsure if they are tracking time. They are tracking response time on their mobile crisis.

LUND: Crisis Centers should track their time for the encounter, too. Every so often you have meetings discussing this, so all stakeholders should have their information down, because one without the other doesn't make a lot of sense.

PRITZL: The only law enforcement jurisdiction that has made an effort to track this is Green Bay Police Department. This is one of the things we want the Crisis Coordinator to work on; a consistent reporting measure across jurisdictions. One jurisdiction – which accounts for a good portion of our Emergency Detentions – but what does that look like for other jurisdictions? The Brown County Sheriff handles a significant portion of our Emergency Detentions as well, and we don't have numbers from them.

LUND: So we don't have numbers from DePere, Ashwaubenon...?

PRITZL: No. We have raised the issue that we would like to look at this across jurisdictions. Green Bay tracks differently, and they have the capability.

SCHUBERT: My hope is once we have the Crisis Coordinator on-board, we can look at other systems, like Milwaukee, to see what they are tracking, what they have for data, and we could get an average metric to shoot for. We'd like to have some other evidence-based data to look at.

LUND: So Milwaukee has that data?

SCHUBERT: They have some good data.

LUND: What about Madison? Racine? Appleton/Outagamie?

PRITZL: I know their detention numbers; I don't know their time numbers. We are concerned with the time we can control. The legal decision making, the clinical decision making is going to take time. The fact that we are restricting someone's rights by placing them in a locked institution needs to be done very carefully and

deliberately. There are parts that can be controlled, but the person is in police custody, and until they are at an accepting facility, they are in custody. The accepting facility decision is made on a crisis assessment. It would be nice to see average times; we know what Green Bay has, but we don't know others.

SCHUBERT: We would like to get better data to the conversation.

Active Shooter Alarm at CTC

Active shooter alarm at CTC was tripped last Friday (February 2). We appreciated the quick response of the Sheriff's Office. It was a mistake, and we are hoping to take the positives away. We want to hear from Sheriff and 911 to discuss what went well, and what can be approved on; gathering data with staff that filled out reports, look at policy and procedures, get stakeholders/jurisdictions together and see what we can learn. It is unfortunate it happened, but we will take the best from it.

LINSSEN / HYLAND moved to receive the CTC Administrator Report and place on file.
Motion was carried unanimously.

6. Reappointment of Kayla Guns (APNP) and Angela Gutche (APNP) to Community Treatment Center Medical Staff:

Both of their files were made available to the Human Services Board. Both Guns and Gutche were unanimously approved by CTC Medical staff following their probationary period.

ANDREWS / LAUNDRIE moved to reappoint Kayla Guns and Angela Gutche (APNPs) to the Community Treatment Center Medical Staff.

Motion was carried unanimously.

7. Financial Report for Community Treatment Center and Community Services:

Finance Manager Eric Johnson referred to his report included within the packet and highlighted the following:

January 2018 Report – 2017 year-end shows significant Purchase Services levels resulting in unfavorable budget variance. However, very favorable CCS and WIMMCR cost report settlements from 2016 and adjustments from 2015, have been received, but are not final yet. There is a required "pick up session" which adjusts those numbers and we are working through that now. There is a potential those additional revenues may cover most of the Purchase Services, so it is possible we will come out closer to budget.

February 2018 Report – This is an unusual month for us as 2017 year-end is not closed, and January is not closed. Good payroll and benefit numbers for two first pay periods in 2018. Both CTC and Community Services show 8% of the annual budget for overall personnel costs. We will need to keep an eye on personnel costs during the first quarter, but there was significant overtime pay for the nursing home.

LINSSEN: The items you mentioned regarding 2017 budget, when will we see that? Will it be counted in 2017 or will it carry over into 2018 for the balance sheets?

JOHNSON: The initial settlement amounts were received in 2017, and we would include anything that is received or expected to be received before we close the books. The books won't close until the middle of March, so we can still accrue things back into 2017.

LUND: Budget adjustments will come through the Human Services Committee, and then come back to the (HS) Board.

JOHNSON: By the end of March, you should be seeing the final 2017 numbers, and budget adjustments that might be needed.

PRITZL: The first budget adjustment should come through in the next two weeks.

JOHNSON: The next time this board meets, I still won't have final numbers, but I should have more information that I can provide.

CLANCY / LAUNDRIE moved to approve the Financial Report and place on file.
Motion was carried unanimously.

8. Statistical Reports: a, b & c

Please refer to the packet which includes this information.

ANDREWS / HYLAND moved to receive Statistical Reports a, b & c and place on file.
Citizen Board Member, Jesse Brunette abstained, as his employer is included within the reports. Motion was passed.

9. Request for New Non-Continuous Provider & New Provider Contract:

Please refer to the packet which includes this information.

ANDREWS / LAUNDRIE moved to receive New Non-Continuous Provider and New Provider Contract Reports and place on file.
Motion was carried unanimously.

11. Other Matters:

Citizen Board Member, Paula Laundrie commented the case examples within the reports, including the short narratives, are the high point of all the information she receives within the packets. She likes seeing the success stories, and how we are utilizing diverse providers within our county.

Next Meeting: Thursday, March 8, 2018 at 5:15 p.m.
Sophie Beaumont Building
111 N. Jefferson Street
Green Bay, WI 54301

11. Adjourn Business Meeting:

LAUNDRIE / LINSSEN moved to adjourn.
Motion passed unanimously.

Chairman Lund adjourned the meeting at 6:02 p.m.

Respectfully Submitted,
Catherine Foss
Office Manager

BROWN COUNTY HEALTH & HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-2188



Erik Pritzl, Executive Director

Phone (920) 448-6000 Fax (920) 448-6166

To: Human Services Board
Human Services Committee

From: Erik Pritzl, Executive Director

Date: February 8, 2018

Re: Executive Director's Report

General Updates:

Recruitment is continuing for a Community Services Administrator (formerly titled Deputy Director). During the time the position has been vacant, duties have been covered by the Executive Director and Managers. Interviews are being scheduled over the next two weeks, and we are hopeful that a successful recruitment is the outcome.

The Poverty Outcomes Improvement Network Team (POINT) Regional Steering Council met for a planning session last week. This is a regional initiative to increase self-sufficiency of all people in Northeast Wisconsin. The effort has been led by the United Way organizations in three communities (Green Bay, Fox Cities, and Oshkosh) in partnership with the community foundations in these communities. There are four drivers identified for improvement—education, economic stability, health and wellness, and family support and social connectedness. Agencies in the region are working on projects attached to the drivers, with support of continuous improvement facilitators.

Community Services:***Emergency Preparedness***

The division has been reviewing Emergency Support Function (ESF) 6, and the responsibilities for mass care, human services, housing and emergency assistance if activation is needed. With the support of a Preparedness Community Educator in the Public Health division, a meeting was convened with support agencies for the ESF 6 on February 1st. A follow up meeting will be scheduled to review response plans and assess procedures.

Children, Youth and Families

Child Protection is starting the year very active. In January, there were 45 “same day” referrals meaning these situations required a same day response by an Initial Assessment caseworker. This is the highest number of same day responses observed in a three year period. Overall referrals were also at the highest level for a month in a three year period.

Behavioral Health

January was active for emergency detentions (96), but consistent with 2017 (95). More agreements and commitment orders were pursued this year. This needs to be watched because if this continues, there could be pressure put on case management staff to meet the increased caseload.

Related to Behavioral Health, there has been interest at the Criminal Justice Coordinating Board in forming a court services division or department to bring together different program units to serve the Treatment Court and Diversion programs. This could include staff assigned to the Treatment Courts, the jail liaison position, and future positions, if needed, for program expansion.

Community Treatment Center:

January showed a somewhat higher census for the Community Treatment Center residential units associated with inpatient psychiatric care and stabilization. Nicolet Psychiatric Center averaged a daily census of 11.9 for the month, and daily census for Bay Haven (CBRF) was at 4.2.

The department continues to work with Administration to assess operations at the Community Treatment Center for efficiencies and optimal service delivery options for the facility going forward. We will collaboratively engage a consulting firm to assess short-term and long-term planning needs for expenses and services offered at the Community Treatment Center.

BROWN COUNTY HEALTH & HUMAN SERVICES

Brown County Community Treatment Center
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Luke Schubert, Hospital & Nursing Home Administrator

Phone (920) 391-4701 Fax (920) 391-4872

NPC January Monthly Report

1. **Patient Care Issues**- There was no patient care concerns noted in January.
2. **Contracted Services Issues** – There were two contract reviews conducted at the CTC in January: Mobilexusa Portable Diagnostic Services Agreement and Bellin Laboratory Services. The Mobilexusa contract is still under review in relation to the evaluation of service expectations. The Resource Laboratory contract with Bellin Health will be sent out for RFP based on our purchasing policy due to an upcoming change in service integration with Electronic Medical Records system.
3. **Summary of patient complaints**- There was one patient care grievance filed in January. The concern was unsubstantiated.
4. **Federal/State Regulatory Concerns**- There was no new CMS or DHS surveys conducted during the month of January on NPC or any of the inpatient units. We have one pending DHS self-report pending for follow up. That review will occur at Bayshore Village.
5. **Approval of Medical Staff appointments**- Kayla Guns, APNP and Angela Gutche, APNP were unanimously recommended for reappointment by the Medical Staff Committee in January. The re-appointment checklist with supporting documentation is brought to the committee for review and request for reappointment approval.
6. **Other Business**-

Updates on Performance Improvement Projects:

- a. ***Treatment Planning*** – Interdisciplinary Team documentation of measurable, specific goals for treatment plans has drastically improved. We have identified some new areas that need additional compliance monitoring so the PIP

is proposed to be edited accordingly so that these new elements can be monitored for compliance.

b. ***Readmissions and Discharge Planning*** – We finished the calendar year at 9.8 % on a goal of 9.6 % with our readmission rate; A QA Monitoring Plan recommended for 2018. The discharge planning committee will continue to meet and assess client readmission cases and the overall Crisis system in relation to the effect on client readmission rates.

c. ***Clients with no Insurance*** – Project goal met; QA Monitoring Plan recommended for 2018.

Revised Recommendations for 2018 PIPs from the QAPI Committee include:

- a. CTC New Staff Orientation
- b. Treatment Planning (*Revised*)
- c. Insurance Authorizations & Appeals
- d. Legionellosis Water Treatment Monitoring
- e. EM-1 Medical Clearance Throughput (*planned to be initiated when Crisis Coordinator is on-boarded*)

Official Project Charters will be brought to the March 2018 Human Services Board meeting for more discussion, evaluation, and consent for approval.

Active Shooter Alarm @ CTC:

On Friday 02/02/2018, there was an inadvertently activated alarm at the Brown County Community Treatment Center. While the response was what we would hope for and expect in a real emergency situation, this was not a legitimate emergency situation. Evacuations were made based upon proper protocol and at no time was anyone in danger. We appreciated the quick response by law enforcement agencies and apologize for any unnecessary alarm.

We are in the process of conducting a full After Action Review (AAR) event evaluation to determine the strengths of our response and to identify any system improvements that could be made to further enhance policies and procedures, as well as to mitigate any future false alarm occurrences.

Respectfully submitted by:

Luke Schubert, NHA; Hospital and Nursing Home Administrator

BROWN COUNTY HEALTH & HUMAN SERVICES

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Phone (920) 448-6000 Fax (920) 448-6166

Erik Pritzl, Executive Director

To: Human Services Board and Human Services Committee

Date: February 8, 2018

Subject: YTD 1/27/18 Personnel Costs for Community Treatment Center and Community Services

Community Treatment Center

Personnel costs for the Community Treatment Center as of 1/27/18 show YTD payroll and benefit costs at 8% of the annual budget which matches the general benchmark following 2 of 26 payrolls for the year. However, due to rounding actual expense is approximately 0.5% over budget or \$50,595 as a dollar variance.

This variance is in part due to the New Year holiday included in the first pay period of the year, but also indicates the need for monitoring personnel costs in all areas at CTC closely during the first quarter of 2018.

Average daily census compared to budget during January is shown below:

	<u>Actual</u>	<u>Budget</u>
Bayshore Village	60.6	61.4
Nicolet Psychiatric Center	11.9	11.5
Bay Haven CBRF	4.2	5.0

Community Services

Personnel costs for Community Services as of 1/27/18 show YTD payroll and benefit costs at 8% of the annual budget which matches the general benchmark following 2 of 26 payrolls for the year. This resulted in an unfavorable dollar variance of \$793 which indicates overall personnel costs are tracking very close to the level anticipated in the budget.

Respectfully Submitted,

Eric Johnson
Finance Manager



Community Treatment Center Personnel

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions
Fund 630 - Community Treatment Center							
Division 050 - CBRF							
5100	Regular earnings	181,667.00	1,066.00	182,733.00	13,441.12	.00	13,441.12
5102	Paid leave earnings	.00	.00	.00	3,369.18	.00	3,369.18
5103	Premium	.00	.00	.00	1,494.79	.00	1,494.79
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	58,518.00	153.00	58,671.00	7,211.07	.00	7,211.07
5198	Fringe benefits - Budget only	210.00	.00	210.00	.00	.00	.00
Division 050 - CBRF Totals		\$240,395.00	\$1,219.00	\$241,614.00	\$25,516.16	\$0.00	\$25,516.16
Division 051 - Hospital							
5100	Regular earnings	1,696,590.00	11,066.00	1,707,656.00	105,376.41	.00	105,376.41
5102	Paid leave earnings	.00	.00	.00	14,293.96	.00	14,293.96
5103	Premium	71,243.00	.00	71,243.00	12,503.61	.00	12,503.61
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	579,730.00	1,588.00	581,318.00	48,538.07	.00	48,538.07
5198	Fringe benefits - Budget only	(3,130.00)	.00	(3,130.00)	.00	.00	.00
Division 051 - Hospital Totals		\$2,344,433.00	\$12,654.00	\$2,357,087.00	\$180,712.05	\$0.00	\$180,712.05
Division 052 - Nursing Home							
5100	Regular earnings	2,249,089.00	13,591.00	2,262,680.00	170,839.28	.00	170,839.28
5102	Paid leave earnings	.00	.00	.00	19,229.63	.00	19,229.63
5103	Premium	156,528.00	.00	156,528.00	28,386.56	.00	28,386.56
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	986,399.00	1,951.00	988,350.00	87,697.32	.00	87,697.32
5198	Fringe benefits - Budget only	(1,793.00)	.00	(1,793.00)	.00	.00	.00
Division 052 - Nursing Home Totals		\$3,390,223.00	\$15,542.00	\$3,405,765.00	\$306,152.79	\$0.00	\$306,152.79



Community Treatment Center Persc

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	Transact
Fund 630 - Community Treatment Center							
Division 053 - Support Services							
5100	Regular earnings	892,805.00	9,012.00	901,817.00	57,766.04	.00	57,766.04
5102	Paid leave earnings	.00	.00	.00	9,941.70	.00	9,941.70
5103	Premium	30,200.00	.00	30,200.00	2,892.83	.00	2,892.83
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	362,233.00	1,294.00	363,527.00	32,886.77	.00	32,886.77
5198	Fringe benefits - Budget only	806.00	.00	806.00	.00	.00	.00
Division 053 - Support Services Totals		\$1,286,044.00	\$10,306.00	\$1,296,350.00	\$103,487.34	\$0.00	\$103,487.34
Division 100 - Administrative							
5100	Regular earnings	1,432,884.00	9,452.00	1,442,336.00	88,730.29	.00	88,730.29
5102	Paid leave earnings	.00	.00	.00	10,507.84	.00	10,507.84
5103	Premium	.00	.00	.00	997.16	.00	997.16
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	523,617.00	1,356.00	524,973.00	47,724.75	.00	47,724.75
5198	Fringe benefits - Budget only	3,907.00	.00	3,907.00	.00	.00	.00
Division 100 - Administrative Totals		\$1,960,408.00	\$10,808.00	\$1,971,216.00	\$147,960.04	\$0.00	\$147,960.04
Community Treatment Center Totals		\$9,221,503.00	\$50,529.00	\$9,272,032.00	\$763,828.38	\$0.00	\$763,828.38
							\$713,231.00
							(\$50,595.00)



Community Services Person

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	Trans
Fund 201 - Community Services							
Division 110 - Agency Mgt							
5100	Regular earnings	1,286,154.00	15,788.00	1,301,942.00	87,469.29	.00	87,469.29
5102	Paid leave earnings	.00	.00	.00	7,652.56	.00	7,652.56
5103	Premium	10,635.00	.00	10,635.00	15.87	.00	15.87
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	448,559.00	2,266.00	450,825.00	39,726.86	.00	39,726.86
5198	Fringe benefits - Budget only	3,519.00	.00	3,519.00	.00	.00	.00
Division 110 - Agency Mgt Totals		\$1,748,867.00	\$18,054.00	\$1,766,921.00	\$134,864.58	\$0.00	\$134,864.58
Division 130 - Econ Sup							
5100	Regular earnings	2,634,797.00	24,861.00	2,659,658.00	176,098.06	.00	176,098.06
5102	Paid leave earnings	.00	.00	.00	26,283.95	.00	26,283.95
5103	Premium	8,661.00	.00	8,661.00	7.37	.00	7.37
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	1,305,613.00	3,565.00	1,309,178.00	112,732.80	.00	112,732.80
5198	Fringe benefits - Budget only	16,081.00	.00	16,081.00	.00	.00	.00
Division 130 - Econ Sup Totals		\$3,965,152.00	\$28,426.00	\$3,993,578.00	\$315,122.18	\$0.00	\$315,122.18
Division 140 - Child & Fam							
5100	Regular earnings	5,994,165.00	135,469.00	6,129,634.00	433,216.62	.00	433,216.62
5102	Paid leave earnings	.00	.00	.00	50,905.90	.00	50,905.90
5103	Premium	43,657.00	.00	43,657.00	11,496.34	.00	11,496.34
5109	Salaries reimbursement	.00	.00	.00	.00	.00	.00
5110	Fringe benefits	2,357,821.00	19,437.00	2,377,258.00	194,154.36	.00	194,154.36
5198	Fringe benefits - Budget only	7,975.00	.00	7,975.00	.00	.00	.00
Division 140 - Child & Fam Totals		\$8,403,618.00	\$154,906.00	\$8,558,524.00	\$689,773.22	\$0.00	\$689,773.22



Community Services Person

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	Trans
Fund 201 - Community Services							
Division 160 - Adult & Fam							
5100	Regular earnings	401,880.00	10,144.00	412,024.00	25,436.83	.00	25,
5102	Paid leave earnings	.00	.00	.00	2,116.39	.00	2,
5103	Premium	.00	.00	.00	69.69	.00	
5109	Salaries reimbursement	.00	.00	.00	.00	.00	
5110	Fringe benefits	158,542.00	1,455.00	159,997.00	11,179.21	.00	11,
5198	Fringe benefits - Budget only	946.00	.00	946.00	.00	.00	
Division 160 - Adult & Fam Totals		\$561,368.00	\$11,599.00	\$572,967.00	\$38,802.12	\$0.00	\$38,
Division 170 - Behavioral Health							
5100	Regular earnings	3,299,863.00	61,054.00	3,360,917.00	202,981.33	.00	202,
5102	Paid leave earnings	.00	.00	.00	30,027.96	.00	30,
5103	Premium	3,770.00	.00	3,770.00	322.79	.00	
5109	Salaries reimbursement	.00	.00	.00	.00	.00	
5110	Fringe benefits	1,287,225.00	8,761.00	1,295,986.00	93,277.80	.00	93,
5198	Fringe benefits - Budget only	4,265.00	.00	4,265.00	.00	.00	
Division 170 - Behavioral Health Totals		\$4,595,123.00	\$69,815.00	\$4,664,938.00	\$326,609.88	\$0.00	\$326,
Community Services Totals		\$19,274,128.00	\$282,800.00	\$19,556,928.00	\$1,505,171.98	\$0.00	\$1,505,
							\$1,504,
							(\$:

**BROWN COUNTY COMMUNITY TREATMENT CENTER
JANUARY 2018 BAY HAVEN STATISTICS**

ADMISSIONS	January	YTD 2018	YTD 2017
Voluntary - Mental Illness	24	24	30
Voluntary - Alcohol	0	0	0
Voluntary - AODA/Drug	0	0	0
Police Protective Custody - Alcohol	0	0	0
Commitment - Alcohol	0	0	0
Commitment - Drug	0	0	0
Court-Ordered Evaluation	0	0	0
Emergency Commitment- Alcohol	0	0	0
Emergency Detention - Drug	0	0	0
Emergency Detention - Mental Illness	0	0	0
Court Order Prelim. - Mental Illness	0	0	0
Court Order Prelim. - Alcohol	0	0	0
Court Order for Final Hearing	0	0	0
Commitment - Mental Illness	0	0	0
Return from Conditional Release	0	0	0
Court Order Prelim. - Drug	0	0	0
Other - EPP	2	2	1
TOTAL	26	26	31

AVERAGE DAILY CENSUS	January	YTD 2018	YTD 2017
Bay Haven	4.2	4.2	6.0
TOTAL	4.2	4.2	6.0

INPATIENT SERVICE DAYS			
Bay Haven	131	131	180
TOTAL	131	131	180

BED OCCUPANCY			
Bay Haven	28%	28%	40%
TOTAL (15 Beds)	28%	28%	40%

DISCHARGES			
Bay Haven	24	24	2
TOTAL	24	24	2

DISCHARGE DAYS			
Bay Haven	89	89	13
TOTAL	89	89	13

ADMISSIONS BY UNITS			
Bay Haven	26	26	31
TOTAL	26	26	31

AVERAGE LENGTH OF STAY			
Bay Haven	4	4	
TOTAL	4	4	

ADMISSIONS BY COUNTY			
Brown	23	23	27
Door	1	1	1
Kewaunee	0	0	0
Oconto	1	1	1
Marinette	0	0	0
Shawano	1	1	0
Waupaca	0	0	1
Menominee	0	0	0
Outagamie	0	0	0
Manitowoc	0	0	0
Winnebago	0	0	0
Other	0	0	1
TOTAL	26	26	31

AVERAGE LENGTH OF STAY BY COUNTY			
Brown	5	5	
Door	4	4	
Kewaunee	0	0	
Oconto	2	2	
Marinette	0	0	
Shawano	7	7	
Waupaca	0	0	
Menominee	0	0	
Outagamie	0	0	
Manitowoc	0	0	
Winnebago	0	0	
Other	4	4	
TOTAL	4	4	

READMIT WITHIN 30 DAYS			
Bay Haven	1	1	0
TOTAL	1	1	0

In/Outs	Current	YTD	2017
	4	4	

**BROWN COUNTY COMMUNITY TREATMENT CENTER
JANUARY 2018 NICOLET PSYCHIATRIC CENTER STATISTICS**

ADMISSIONS	January	YTD 2018	YTD 2017
Voluntary - Mental Illness	11	11	10
Voluntary - Alcohol	0	0	0
Voluntary - AODA/Drug	0	0	0
Police Protective Custody - Alcohol	0	0	0
Commitment - Alcohol	0	0	0
Commitment - Drug	0	0	0
Court-Ordered Evaluation	0	0	0
Emergency Commitment- Alcohol	0	0	0
Emergency Detention - Drug	0	0	0
Emergency Detention - Mental Illness	46	46	53
Court Order Prelim. - Mental Illness	0	0	0
Court Order Prelim. - Alcohol	0	0	0
Court Order for Final Hearing	0	0	0
Commitment - Mental Illness	0	0	0
Return from Conditional Release	8	8	8
Court Order Prelim. - Drug	0	0	0
Other	0	0	0
TOTAL	65	65	71

ADMISSIONS BY UNITS			
Nicolet	65	65	71
TOTAL	65	65	71

ADMISSIONS BY COUNTY			
Brown	53	53	50
Door	2	2	1
Kewaunee	0	0	2
Oconto	5	5	3
Marinette	2	2	0
Shawano	0	0	2
Waupaca	0	0	0
Menominee	0	0	0
Outagamie	2	2	4
Manitowoc	0	0	3
Winnebago	0	0	1
Other	1	1	5
TOTAL	65	65	71

READMIT WITHIN 30 DAYS			
Nicolet	5	5	9
TOTAL	5	5	9

AVERAGE DAILY CENSUS	January	YTD 2018	YTD 2017
Nicolet	11.9	11.9	10.
TOTAL	11.9	11.9	10.

INPATIENT SERVICE DAYS			
Nicolet	368	368	33
TOTAL	368	368	33

BED OCCUPANCY			
Nicolet	74%	74%	67%
TOTAL (16 Beds)	74%	74%	67%

DISCHARGES			
Nicolet	69	69	7
TOTAL	69	69	7

DISCHARGE DAYS			
Nicolet	362	362	37
TOTAL	362	362	37

AVERAGE LENGTH OF STAY			
Nicolet	5	5	
TOTAL	5	5	

AVERAGE LENGTH OF STAY BY COUNTY			
Brown	6	6	
Door	4	4	
Kewaunee	0	0	
Oconto	4	4	
Marinette	5	5	
Shawano	0	0	
Waupaca	0	0	
Menominee	0	0	
Outagamie	3	3	
Manitowoc	4	4	
Winnebago	0	0	
Other	8	8	
TOTAL	5	5	

In/Outs	Current	YTD	2017
	1	1	

Brown County Health and Human Services

Report of Child Abuse/Neglect or Service Request by Month

Month	2015	2016	2017	% Change from 2016 to 2017	2018	% Change from 2017 to 2018
January	415	435	466	6.65%	509	9.23%
February	432	463	455	-1.73%		
March	460	466	423	-9.23%		
April	455	452	448	-.88%		
May	422	465	550	18.28%		
June	330	348	352	1.15%		
July	312	301	288	-4.32%		
August	282	312	369	18.27%		
September	420	497	440	-11.47%		
October	440	430	517	20.23%		
November	426	435	449	3.22%		
December	415	407	416	2.21%		
Total	4809	5011	5173	3.23%		

Reports Investigated/Services Offered by Month

Month	2015	2016	2017	% Change from 2016 to 2017	2018	% Change from 2017 to 2018
January	146	116	151	23.18%	171	13.25%
February	141	141	135	-4.26%		
March	161	124	144	16.13%		
April	144	138	149	7.97%		
May	147	135	154	14.07%		
June	143	99	123	24.24%		
July	113	101	112	10.89%		
August	113	88	139	57.95%		
September	150	126	146	15.87%		
October	141	101	163	61.39%		
November	100	119	143	20.17%		
December	121	129	109	-15.50%		
Total	1620	1417	1668	17.71%		

HUMAN SERVICES
2018 PROVIDER CONTRACT LIST - 3/5/2018

Agency	Service(s) Description	Target Client	Prob Un
Acceptional Minds LLC	Living skills for autistic and/or behaviorally-challenged children and their families	Children	CLTS, C
A & J Vans Inc.	Vehicle modifications for families with disabled children	Families of disabled children	CLTS,
Adams L AFH	3-4 bed traditional adult family home	MH/AODA	Beha Health
Advocates for Healthy Transitional Living LLC	Treatment foster care placing agency and respite care	High behavioral needs children	CABH CI
Affinity Health (St. Elizabeth Hospital & Affinity Medical Group)	Inpatient detox services	MH/AODA	Beha He
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children	C
Angels on Arcadian	CBRF (assisted living)	DD, PD	CA
Anna's Healthcare (formerly County Living)	CBRF (assisted living)	MH/AODA	Beha Health
ASPIRO Inc.	Birth to 3 services, respite, prevocational training, adult day programming	Children with disabilities	BT3, C
Assisted Living by Hillcrest (Bishop's Court, Birch Creek and Allouez Parkside Village #	CBRF (assisted living) for APS use	At-risk adults	A
Bellin Health Occupational Health Solutions	Drug screenings and transporting inpatient clients to court	Adult parents	CPS, C
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	Beha He
Better Days Mentoring	Youth mentoring services, daily living skills	Youth	CPS, J
Boll Adult Care Concepts	Corporate adult family home (assisted living) with CCS services for high needs behavioral health	MH/AODA	Beha Health
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	Beha Health
Care for All Ages (CFAA)	CBRF (assisted living), child day care (day care used VERY sparingly)	PD with MH issues	Beha Health
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services, domestic violence group	Teens	CPS,
Centerpiece LLC	Social learning groups for children with social communication challenges	Children	C
CP Center	Respite and daily living skills	Children with disabilities	CLTS, B
Childrens Service Society	Treatment foster care placing agency	Children	C
Chileda Institute	Children high-needs residential care center (RCC)	High behavioral needs children	C
Choices to Change	Group home for juvenile offenders	Juvenile offenders	

HUMAN SERVICES
2018 PROVIDER CONTRACT LIST - 3/5/2018

Agency	Service(s) Description	Target Client	Pro Ur
Clarity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	CM
Comfort Keepers	Supportive home care services for Dementia Crisis Innovation Grant	At-risk adults	A
Communication Pathways LLC	Social learning groups for children with social communication challenges	Children	CLTS,
Compass Development	CBRF (assisted living)	PD with MH issues	Beha Health
Curative Connections (formerly NEW Curative)	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA and LTC children	Beha Health CABH
Curo Care LLC	Corporate adult family homes (assisted living)	PD with MH issues	Beha Health
Deer Path Assisted Living Inc.	CBRF, corporate adult family homes (assisted living)	MH/AODA	Beha Health
Dodge County (DBA Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	Beha He
Dynamic Family Solutions	Family counseling/treatment programs	Families of juvenile offenders	
Elsner AFH	1-2 bed traditional adult family home	MH	Beha Health
Encompass Child Care	Child day care	Children	C
Engberg AFH	1-2 bed traditional adult family home	MH	Beha Health
Exceptional Equestrians	Hippotherapy and therapeutic riding to clients with special needs	Children with disabilities	CLTS,
Expressive Therapies LLC	Music therapy for children	Children	C
Family Services of Northeast Wisconsin Inc.	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	Beha Health, APS CA
Family Training Program	Parenting/family skills training	CPS parents, parents of juvenile offenders	JJ,
Family Works Programs, Inc.	Treatment foster care placing agency	Children	CP

**HUMAN SERVICES
2018 PROVIDER CONTRACT LIST - 3/5/2018**

Agency	Service(s) Description	Target Client	Pro Ur
Foundations Health and Wholeness, Inc.	Treatment foster care placing agency and CCS Services	Children and adults	CPS, Beh. He
Friendship House	Group home for juvenile offenders	Juvenile offenders	
Golden House	Domestic abuse services	Adults in need	CPS
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	Beh. Health
Goodwill Industries	Prevocational services	PD with MH issues	CP
Green Bay Transit Commission - NO CONTRACT	Bus passes for transportation to/from school, meetings with parents, etc.	CPS case children and adults	C
Greenfield Rehabilitation Agency, Inc.	Birth to 3 services	Children with disabilities	E
Helping Hands Caregivers	Supportive home care	PD with MH issues	CP
Home Instead Senior Care	Supportive home care	PD with MH issues	CP
Homes for Independent Living	CBRF (assisted living)	MH	Beh. He
HME Home Medical	Medical and therapeutic supplies and equipment	Children	CLTS a
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	Beh. He
Independent Mobility Plus	Medical and therapeutic supplies and equipment	Children	CLTS a
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	Beh. Health
Innovative Counseling	CCS services	BH children and adults	Beh. Health
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	Beh. Health JJ, CPS C
Jackie Nitschke Center Inc.	AODA residential and intensive outpatient services	AODA adults and youth	Beh. Health
Jacobs Fence	Fence construction	At-risk of elopment	C

HUMAN SERVICES
2018 PROVIDER CONTRACT LIST - 3/5/2018

Agency	Service(s) Description	Target Client	Pro, Un
KCC Fiscal Agent Services	Payor of client-hired personal care workers		CLTS,
KUEHG - Kindercare	Child day care	Children	C
Kimbrough, Ellen AFH	1-2 bed traditional adult family home	MH	Beha He
Lad Lake	Youth high-needs residential care center (RCC)	High behavioral needs children	JJ,
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	Beha He
Lutheran Social Services (Homme Home)	Youth (all male) high-needs residential care center (RCC)	High behavioral needs children	CP
Macht Village Programs Inc. (MVP)	Respite care, counseling, daily living skills, CCS services, treatment foster care child placing agency	High behavioral needs children	CABHI CP
Marco Services Inc. - TERMINATED 1/22/18	AODA residential services	AODA adults	Beha He
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	Beha Health
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	Beha He
Mooring Programs Inc.	AODA residential services	AODA adults	Beha He
My Brother's Keeper	Male Mentoring Program	Juvenile males	
Mystic Meadows LLC	Corporate AFH (assisted living)	MH/AODA	Beha Health
NEW Community Shelter Inc.	Homeless sheltering services	MH	Beha He
Northwest Passage	Children high-needs residential care center (RCC)	High behavioral needs children	CP
Nova Counseling Services Inc.	AODA residential services	AODA adults	Beha He
Nurses PRN Home Care	Skilled nursing services	Children	CPS
Oconomowoc Development Training Center	Residential care center (RCC) for juvenile offenders	Juvenile offenders	
Options Counseling Services (Koinonia)	AODA residential services	AODA adults	Beha He
Options for Independent Living Inc.	CCS services, home modification assessments	MH/AODA	Beha Healt
Options Treatment Program	AODA treatment, CCS services	AODA youth and adults	JJ, Dru

**HUMAN SERVICES
2018 PROVIDER CONTRACT LIST - 3/5/2018**

Agency	Service(s) Description	Target Client	Pro Ur
Paragon Industries	Daily respite care	Children with long-term care needs	C
Parmentier AFH	3-4 bed traditional adult family home	MH	Beh: Health
Pathways Treatment	AODA residential treatment for dual diagnosis clients	AODA/MH (dual diagnosis)	Beh: He
Pillar and Vine, Inc.	Treatment foster care placing agency	Children	CF
Prevea Health	Drug screenings	CPS parents, AODA, JJ youth	Beh: Health, JJ, C
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	Beh: Health
Productive Living Systems (Pnuma LLC)	CBRF (assisted living)	PD with MH issues	Beh: Health
Psychological Consultants of Green Bay	Psychological assessments to determine competency	Elderly, DD	A
Ravenwood Behavioral Health	Nursing home for high-needs MH clients	High-needs MH	Beh: He
Rawhide, Inc.	Residential care center (RCC) for juvenile offenders	Juvenile offenders	
Rehabilitation House (Bletzinger)	CBRF		
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	Beh: Health
Sandhill Child Development Center (New Mexico) - THEIR CONTRACT; NOT OURS	Care of an extremely high needs CPS child that we cannot find placement for in WI	Specific CPS Child	C
Social Thinkers	Social learning groups for children with social communication challenges	Children	C
Spatz/Ziegelbauer Receiving Home	Receiving home for emergency placements	Children in need	C
Spectrum Behavioral Health	CCS services	Children	CLTS,
St. Vincent Hospital	Birth to 3 services, home delivered meals	Children with disabilities	e
Talbot AFH	1-2 bed traditional adult family home	MH	Beh: He
Tomorrow's Children Inc.	Children high-needs residential care center (RCC)	High behavioral needs children	CA
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	Beh: He
United Translators	Interpreter/translation services	Non-english speaking	APS
Vande Hey Receiving Home	Receiving home for emergency placements	Children in need	C

**HUMAN SERVICES
2018 PROVIDER CONTRACT LIST - 3/5/2018**

Agency	Service(s) Description	Target Client	Pro U
VanLanen Receiving Home	Receiving home for emergency placements	Children in need	
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	Beh H
Willow Creek Behavioral Health (SBH)	Inpatient psychiatric and detox services	MH/AODA	Beh H
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile offenders	CAI
Wisconsin Lock and Load Electronic Monitoring	UA observed collection and transport for veterans treatment court	AODA adults	Tre: Co
Wisconsin Lock and Load Transport	Provides secure transportation to/from GB to other state facilities	MH, JJ	Beh He:

**Brown County Human Services
New Non-Contracted and Contracted Providers
January 29, 2018**

REQUEST FOR NON-CONTINUOUS/NON-CONTRACTED PROVIDER			
PROVIDER	SERVICE DESCRIPTION	NOT-TO-EXCEED AMOUNT	DATE
Kids in the Kountry	Ongoing day care for CPS children	\$10,000	12/21/17
Maehnowesekiyah Wellness	Domestic violence and parenting classes for client	\$10,000	12/21/17
Individual	Rent for CPS family	\$10,000	12/21/17
Individual	Ongoing respite for a non-related CPS child	\$10,000	12/21/17
Individual	Ongoing respite for a non-related CPS child	\$10,000	1/11/18
Green Bay Housing Authority	Security deposit for CPS family	\$10,000	1/11/18
Camp Akeela	Summer camp utilized by the CLTS unit	\$10,000	1/11/18
Bullfrogs and Butterflies Childcare	Day care used by a foster parent for a CPS child	\$10,000	1/11/18
Pulaski Community School District	Transportation to/from school for foster care children	\$10,000	1/16/18
Wrightstown Community School District	Transportation to/from school for foster care children	\$10,000	1/16/18
Ashwaubenon School District	Transportation to/from school for foster care children	\$10,000	1/16/18
Howard-Suamico School District	Transportation to/from school for foster care children	\$10,000	1/16/18
School District of West De Pere	Transportation to/from school for foster care children	\$10,000	1/16/18
School District of Denmark	Transportation to/from school for foster care children	\$10,000	1/16/18
Unified School District of De Pere	Transportation to/from school for foster care children	\$10,000	1/16/18
Individual	In-home supervision of mother and newborn through In-Home Safety Services	\$10,000	1/18/18
Diversity Counseling	Spanish-spoken counseling services for CPS client	\$10,000	1/18/18
Individual	Ongoing respite for a non-related CPS child	\$10,000	1/25/18
Mayo Clinic	Medical services for a client at Trempealeau	\$10,000	1/25/18
Individual	In-home supervision of mother and newborn through In-Home Safety Services	\$10,000	1/25/18
Individual	Ongoing respite for a non-related CPS child	\$10,000	1/25/18
Individual	Ongoing respite for a non-related CPS child	\$10,000	1/25/18
Individual	Ongoing respite for a non-related CPS child	\$10,000	1/25/18
Individual	Ongoing respite for a non-related CPS child	\$10,000	1/25/18
Individual	Rent to avoid CPS family eviction	\$10,000	1/25/18
Individual	Reimbursement to foster parent for dental bill	\$10,000	1/29/18
GRACE (Green Bay Area Catholic Education) Schools	Early education for delayed CPS child	\$10,000	1/29/18

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	SERVICE DESCRIPTION	TARGET CLIENTS	NOT-TO-EXCEED CONTRACT AMOUNT	DATE
Engberg AFH	1-2 bed adult family home	Behavioral Health	\$21,000	1/26/18